

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION**

Office of Aerospace Medicine

**Archives and Modifications of the
Guide for Aviation Medical Examiners**

Archives and Modifications

Guide Version	Official Date	Revision Number	Description Of Change	Reason For Modification
I.	09/24/2003	Introduction of the 2003 Guide for Aviation Medical Examiners Website		
II.	02/13/2004	1.	Administrative	Install Search Engine located in the Navigation Bar
		2.	Administrative	Insert a WHAT'S NEW link located in the Navigation Bar
		3.	Administrative	The "Instructions" site of the 2003 Guide is deleted and incorporated into the "Introduction" and "Available Downloads" located in the Navigation Bar
		4.	Administrative	Insert an "Available Downloads" site located in the Navigation Bar
		5.	Administrative	Insert a Table of Contents and an Index into the pdf version of the 2004 Guide
		6.	Administrative	Insert a one-page synopsis of the Medical Standards located in the Navigation Bar
		7.	Medical Policy	Insert Section 6. Orthokeratology into Items 31-34. Eye
		8.	Administrative	Relocate Item 46. Footnote # 21 from Head Trauma to Footnote #19, Headaches
		9.	Administrative	Insert Attention Deficit Disorder into Item 47's, Aerospace Medical Disposition Table
		10.	Medical Policy	Revise Item 60; Comments on History and Findings
		11.	Medical Policy	Revise Item 63; Disqualifying Defects
		12.	Medical Policy	Delete from AASI's a History of Monocularity
		13.	Administrative	Insert an Archives located in the Navigation Bar

Guide Version	Official Date	Revision Number	Description Of Change	Reason For Modification
II.	09/16/2004	14.	Administrative	Insert CAD Ultrasound into Item 37's, Aerospace Medical Disposition Table
III.	11/1/2004	1.	Medical Policy	Revise AASI Process to include First- and Second-class Airman Medical Certification
		2.	Administrative	Insert into General Information, a new Section 10 that provides Sport Pilot Provisions
		3.	Administrative	Update revised Title 14, Code of Federal Regulations, §61.53
		4.	Administrative	Insert a link to download a revised, fillable AME Letter of Denial
		5.	Administrative	Insert a link to download a printable AASI Certificate Coversheet
IV.	7/31/05	1.	Administrative	Redesign the appearance and navigable format of the <i>Guide for Aviation Medical Examiners</i>
		2.	Administrative	Revise Section 9., Refractive Surgery heading in Items 31-34. Eyes, to Refractive Procedures
		3.	Medical Policy	Insert Conductive Keratoplasty into Section 9, Items 31-34, Eyes, and into Item 31's Aerospace Medical Disposition Table
		4.	Administrative	Replace optometrist or ophthalmologist reference(s) to "eye specialist"
		5.	Medical Policy	Insert Pulmonary Embolism into Item 35, Lungs and Chest, Aerospace Medical Disposition Table

Guide Version	Official Date	Revision Number	Description Of Change	Reason For Modification
IV.	07/31/2005	6.	Medical Policy	Insert Deep Vein Thrombosis and Pulmonary Embolism into Item 37, Vascular System, Aerospace Medical Disposition Table
		7.	Medical Policy	Insert Deep Vein Thrombosis and Pulmonary Embolism into the Thromboembolic Protocol.

The following changes are made to Version II. of the Guide for Aviation Medical Examiners:

1. Search Engine: Installed a Search Engine at the top of the Navigation Bar of the 2004 Guide for Aviation Medical Examiner's (Guide).

2. WHAT'S NEW: A "What's New" link is inserted in the Navigation Bar of the 2004 Guide. This link provides important airmen medical certification decision-making revisions or items of significance.

3. Instructions site: The "Instructions" site located in the Navigation Bar of the 2003 Guide is deleted and incorporated into the "Introduction" and the newly developed "Available Downloads" sites of the 2004 Guide.

4. "Available Downloads" site: In the Navigation Bar of the 2004 Guide is an "Available Downloads" site, where you can access, download, and print copies of the 2004 Guide (236 pages); synopsis of the Medical Standards (one page); Preambles of Title 14 of the Code of Federal Regulations part 67 Medical Standards and Certification (98 pages); and/or 14 CFR Part 67 (18 pages).

5. Insert a Table of Contents and an Index into the pdf version of the 2004 Guide: In the printable version of the 2004 Guide, insert a Table of Contents and an Index for easier access to pertinent regulations, examination procedures, case disposition guidelines, and disease protocol necessary to obtain medical certification information and guidance.

6. Synopsis of the Medical Standards: In the Navigation Bar insert a one-page synopsis of the medical standards for first-, second-, and third-class airman medical certification.

7. Items 31-34. Eye: Insert Section 6. Orthokeratology into Items 31-34, Eye, located on page 48, as follows:

6. Orthokeratology is acceptable for medical certification purposes, provided the airman can demonstrate corrected visual acuity in accordance with medical standards defined in 14 CFR Part 67. When corrective contact lenses are required to meet vision standards, the medical certificate must have the appropriate limitation annotated. Advise airmen that they must follow the prescribed or proper use of orthokeratology lenses to ensure compliance with 14 CFR 61.53. Airmen should consider possible rotation, changes, or extensions of their work schedules when deciding on orthokeratology retainer lens use.

8. Item 46. Neurologic: In Item 46. Neurologic, Head Trauma aerospace medical disposition table on page 110 of the 2003 Guide, relocate Footnote #21 link and attach link to Item 46. Neurologic, Headaches aerospace medical disposition table on page 108, as Footnote #19, in the 2004 Guide.

9. Item 47. Psychiatric: In Item 47. Psychiatric, Psychiatric Conditions aerospace medical disposition table, page 117 of the 2004 Guide, insert Attention Deficit Disorder as follows:

DISEASE/CONDITION	CLASS	EVALUATION DATA	DISPOSTION
Psychiatric Conditions			
Attention Deficit Disorder	All	Submit all pertinent medical information and clinical status report to include documenting the period of use, name and dosage of any medication(s) and side-effects	Requires FAA Decision

10. Item 60: Comments on History and Findings:

Revise Item 60 as follows: Comments on all positive history or medical examination findings must be reported by Item Number. Item 60 provides the Examiner an opportunity to report observations and/or findings that are not asked for on the application form. Concern about the applicant's behavior, abnormal situations arising during the examination, unusual findings, unreported history, and other information thought germane to aviation safety should be reported in Item 60. The Examiner should record name, dosage, frequency, and purpose for all currently used medications.

If possible, all ancillary reports such as consultations, ECG's, x-ray release forms, and hospital or other treatment records should be attached. If the delay for those items would exceed 14 days, the Examiner should forward all available data to the AMCD, with a note specifying what additional information is being prepared for submission at a later date.

If there are no significant medical history items or abnormal physical findings, the Examiner should indicate this by checking the appropriate block.

11. Item 63: Disqualifying Defects

Revise Item 63 as follows: List all disqualifying defects, diagnoses, or conditions by **ITEM NUMBER** that serve as the basis for **denial** or **deferral** in Item 63. Comments or discussion of specific observations or findings may be reported in Item 60 or submitted on a separate sheet of paper.

If the Examiner denies the applicant, the Examiner must issue a Letter of Denial, FAA Form 8500-2 to the applicant, and report the issuance of the denial in Item 60.

12. AME Assisted Special Issuance (AASI): In the AASI section, delete AASI for History of Monocularity

13. Archives: Insert in the 2004 Guide an Archive site, which delineates each modification, its effective date, a description, and the reason for modification.

14. Item 37. Vascular Conditions: In Item 37, Vascular System aerospace medical disposition table, Arteriosclerotic Vascular Disease/Condition, page 74 of Version II. of the Guide, insert CAD US if applicable as follows:

DISEASE/CONDITIONS	CLASS	EVALUATION DATA	DISPOSITION
Vascular Conditions			
Arteriosclerotic Vascular disease with evidence of circulatory obstruction	All	Submit all documentation in accordance with CVE Protocol, and include a GXT, and CAD US if applicable	Requires FAA Decision

The following changes are made to Version III. of the Guide for Aviation Medical Examiners:

1. AASI Process now covers First- and Second-Class Airman Medical Certification in addition to Third-class: Revise the 19 approved conditions for AASI as follows:

Examiners are authorized to reissue an airman medical certificate to **ALL CLASSES**, provided the applicant meets the specific certification decision-making criteria, and is otherwise qualified.

NOTE: If this is a **first-time issuance** for a disqualifying disease/condition covered under the AASI process and the applicant has all of the requisite medical information necessary for a determination, the Examiner **must defer** and submit all of the documentation to the AMCD or contact the RFS. Following the granting of an Authorization for Special Issuance of a Medical Certificate (Authorization) by the AMCD or RFS's office, an Examiner may reissue an airman medical certificate provided the applicant is otherwise qualified.

2. General Information, Section 10. Insert a new Section 10, entitled *Operations Not Requiring a Medical Certificate*. The section provides Glider, Free Balloon, and "Sport" Pilot provisions.

Renumbered the sections following Section 10 under General Information.

3. Title 14 Code of Federal Regulations (CFR), §61.53. Update the revised (July 27, 2004) 14 CFR part 61.53 by adding subparagraph (c) as follows:

(c) Operations requiring a medical certificate or a U.S. driver's license. For operations provided for in Sec. 61.23(c), a person must meet the provisions of--

(1) Paragraph (a) of this section if that person holds a valid medical certificate issued under part 67 of this chapter and does not hold a current and valid U.S. driver's license.

(2) Paragraph (b) of this section if that person holds a current and valid U.S. driver's license.

4. Aviation Medical Examiner Letter of Denial. Insert a link to download a revised, fillable Aviation Medical Examiner Letter of Denial.

(NOTE: This denial letter supercedes former Form 8500-2).

5. Aviation Medical Examiner Assisted Special Issuance Certificate Coversheet. Insert a link to download a printable AASI Certificate Coversheet.

The following changes are made to Version IV. of the Guide for Aviation Medical Examiners:

1. The Guide for Aviation Medical Examiner's "MAKEOVER."

The Office of Aerospace Medicine was tasked to redesign the Guide's website to conform with the DOT and the FAA's National Policy concerning Web Management.

2. Items 31-34. Eye: Revise Section 9. Refractive Surgery heading to "Refractive Procedures."

3. Items 31-34. Eye: Insert Conductive Keratoplasty into Section 9.A.of Items 31-34. Eye, located on page 51, and in Item 31. Eyes, General aerospace medical disposition table, page 53, as follows:

A. Conductive Keratoplasty (CK): CK is used for correction of farsightedness. As this procedure is not considered permanent and there is expected regression of visual acuity in time, the FAA may grant an Authorization for special issuance of a medical certificate under 14 CFR 67.401 to an applicant who has had CK.

The FAA evaluates CK procedures on an individual basis following a waiting period of 6 months. The waiting period is required to permit adequate adjustment period for fluctuating visual acuity. The Examiner can facilitate FAA review by obtaining all pre- and post-operative medical records, a Report of Eye Evaluation (FAA Form 8700-7) from a treating or evaluating eye specialist with comment regarding any adverse effects or complications related to the procedure.

DISEASE/CONDITION	CLASS	EVALUTION DATA	DISPOSITION
Eyes, General			
Conductive Keratoplasty - Farsidedness	All	See Conductive Keratoplasty Protocol	Requires FAA Decision

4. Eye Specialist: Replace optometrist or ophthalmologist reference(s) with “eye specialist.”

5. Item 35. Lungs and Chest: Insert Pulmonary Embolism into the aerospace medical disposition table, page 60, as follows:

DISEASE/CONDITION	CLASS	EVALUTION DATA	DISPOSITION
Disease of the Lungs, Pleura, or Mediastinum			
Pulmonary Embolism	All	See Thromboembolic Disease Protocol	See Thromboembolic Disease Protocol

6. Item 37. Vascular System: Insert Deep Vein Thrombosis and Pulmonary Embolism into the aerospace medical disposition table, page 76, as follows:

DISEASE/CONDITION	CLASS	EVALUTION DATA	DISPOSITION
Vascular Conditions			
Phlebothrombosis or Thrombophlebitis; Deep Vein Thrombosis; Pulmonary Embolism	1 st & 2nd	See Thromboembolic Disease Protocol	Requires FAA Decision
	3rd	Document history and findings See Thromboembolic Disease Protocol	A single episode resolved, not currently treated with anticoagulants, and a negative evaluation - Issue If history of multiple episodes - Requires FAA Decision

7. Thromboembolic Disease Protocol: Insert Deep Vein Thrombosis and Pulmonary Embolism into the protocol as follows:

PROTOCOL FOR THROMBOEMBOLIC DISEASE

An applicant with a history of thromboembolic disease, ex: Deep Vein Thrombosis, Pulmonary Embolism; must submit the following if consideration for medical certification is desired...